



Annual Performance Report Form

Facility Name: Baxter Caribe Inc.

Performance Track ID #: A020032

Annual Performance Report #: 1

Reporting Year: 2001

Due Date: July 1, 2002

Section A

General Facility Information

To the extent possible, EPA will pre-complete items A.1-A.8 for you. Please ensure that the information in A.1-A.8 below is accurate, complete, and up to date. Please supply or revise any information as necessary and then check the box to the left of the item(s) to indicate where changes have been made. Items A.9 and A.10 cannot be pre-completed; please respond as directed in A.9 and A.10 below.

Did you make changes? If so, check box.

- A.1 ☒ Name of your facility: Baxter Healthcare Inc.
- A.2 ☐ Name of your parent company: Baxter Healthcare
- A.3 ☐ Facility contact person for the Performance Track program
Name: Mr./Mrs./Ms./Dr. Pablo Velez
Title: Director EHS
Phone: 787-864-5050 x5252 Fax: 787-866-0087 E-mail: pablo_velez@baxter.com
- A.4 ☐ Facility's location
Street Address: St# 3 Km. 142.5
Street Address (cont.):
City/State/Zip Code: Guayama,P.R. (00784)
- A.5 ☐ Facility's website address (if any):
- A.6 ☐ Number of employees (full-time equivalents) who currently work in the facility:
☐ Fewer than 50 ☐ 50 - 99 ☒ 100 - 499 ☐ 500 - 1000 ☐ More than 1000
- A.7 ☐ Does your company meet the Small Business Administration definition of a small business for your sector? ☐ Yes ☒ No
- A.8 ☐ North American Industrial Classification System (NAICS) Code(s) that are used to classify business at the facility: 325412
- A.9 ☒ In your application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any (additional) changes to your facility's list of products and/or activities? If so, please list them in the space below. ☐ Yes ☒ No
- A.10 ☐ Please update the list of environmental requirements that apply to your facility. In the space below, indicate any changes that have taken place during this reporting period. If you have no changes to report, please write "No changes."
No changes

Section B

Environmental Management System

B.1 Environmental Management System Assessment. Please summarize EMS assessments conducted *during the year*. Attach additional sheets as necessary.

a. Was an EMS audit or other assessment done by an independent third party?

☒ Yes ☐ No

If yes, please provide the *type* (e.g., ISO 14001 certification), the *scope*, and the *dates* (mo/yr) of each assessment.

We are an ISO14001 certified facility official certification received in June 2001. An EMS divisional audit was performed in May 2001, no major findings were reported. We were audited against our Baxter EHS standard (BEHst) which includes the ISO14001 criteria, and OSHA PSM and HAZOP which is our risk assessment tool.

b. Was an internal or corporate EMS audit conducted? ☒ Yes ☐ No

If yes, please provide the *scope* and the *dates* (mo/yr) of each audit.

We had a Divisional audit in May 2001 which included our whole EHS program.

c. Was a compliance audit conducted? ☒ Yes ☐ No

If yes, please provide the *scope* and the *dates* (mo/yr) of each audit, and indicate *who* conducted the audit(s) (e.g., facility staff, corporate groups, third party).

A compliance audit was part of Divisional audit held in May 2001. Compliance aspect of the audit focused in our compliance with EPA, PREQB, PRASA and all aspects related to our environmental permits and regulations

d. (Optional) If you would like to describe any other audits or inspections that were conducted at your facility, please do so here.

Section B

(continued)

B.1

e. Briefly summarize corrective actions taken and other improvements made as a result of your EMS assessments and compliance audits.

As a result of our EMS audit we improved our critical aspects identification system and our LOTO (Lock Out Tag Out) procedures

f. Has your facility corrected all instances of potential non-compliance and EMS non-conformance identified during your audits and other assessments?

☒ Yes ☐ No ☐ No such instances identified

If no, please explain your plans to correct these instances.

g. When was the last Senior Management review of your EMS completed? *mo/yr* 03/02

Who headed the review?

Name: Mr./Mrs./Ms./Dr. Ron Burkett

Title: Division EHS Director

Section B

(continued)

B.2 ISO 14001 Certification. Is your facility currently certified to ISO 14001? ☒ Yes ☐ No

B.3 Environmental Aspects Identification. When did your facility last conduct a systematic identification and/or review of your environmental aspects? *mo/yr* 02/02

B.4 Progress Toward Achieving Objectives and Targets. In the table below, please provide a narrative summary of progress made toward EMS objectives and targets. **You may limit the summary to environmental aspects that are *significant* and towards which *progress* has been made during the reporting year.** In cases where progress relates specifically to a Performance Track performance commitment, complete the *Environmental Aspect* column, but in the *Progress* column simply refer to the performance commitment tables in Section C, i.e. "See Section C." Attach additional sheets as necessary.

<i>Environmental Aspect</i>	<i>Progress Made This Year</i> (e.g., quantitative or qualitative improvements, activities conducted)
Hazardous waste generation reduction	In 2001 we performed changes in our processes which resulted in a solvent reduction . This solvent is acetone and as a result our hazardous waste generation was reduced by 30% and our ratio of hazardous waste per lb of finished goods decreased from .24 to .16
Emission of VOCs	By closing inefficient operations and integrating production in a modern facility we had a reduction in VOCs emissions.
Discharged water parameters	We modified our water treatment and obtained a significant reduction in BOD5 content in our discharge of industrial water.
Total solid waste	By implementing a recycling program we reduced our generation of solid wastes .
Energy Conservation	We reduced our energy usage by 4% by working on HVAC optimization a Lightning reduction projects . This resulted in more than \$100m reduction in enrgy costs.

Section C

Environmental Performance Commitments

Please use the tables on pages 6-9 to summarize your facility's environmental performance against your Performance Track performance commitments. Complete only those boxes related to the baseline, current year, and performance commitment. If any of the boxes have been pre-completed for you, please verify the information. If you find information that is incorrect, cross it out and write in the correct information. **Leave blank any columns for future reporting years.**

C.1

Performance Commitment 1

a. Use this table to report data related to your first performance commitment.

Category (see page 16 of the instructions): Waste

Aspect (see page 16 of the instructions): Hazardous Waste Generation

	<i>Baseline</i> (as stated in your application)	<i>Year 1</i>	<i>Year 2</i>	<i>Year 3</i>	<i>Performance Commitment</i> (the goal stated in your application)
<i>Calendar Year</i>	1998	2001			2003
<i>Actual Quantity</i> (per year)	841000	543160			(optional)
<i>Measurement Units</i>	lbs				
<i>Normalizing Factor*</i>	1.0	1.6			(optional)
<i>Basis for your Normalizing Factor*</i>	Production				
<i>Normalized Quantity*</i> (per year)	841000	339475			588700

*See pages 17-19 of the instructions for more information

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

We reduced the hazardous waste generation by reducing the use of solvents in our process. Ratio was reduced from .49lbs/lbrprod on base year to .16lbs/lbrprod. on the third year.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

Section C

(continued)

C.2

Performance Commitment 2

a. Use this table to report data related to your second performance commitment.

Category (see page 16 of the instructions): Solid Wastes					
Aspect (see page 16 of the instructions): Solid Waste Generation					
	<i>Baseline</i> (as stated in your application)	<i>Year 1</i>	<i>Year 2</i>	<i>Year 3</i>	<i>Performance Commitment</i> (the goal stated in your application)
<i>Calendar Year</i>	1999	2001			2003
<i>Actual Quantity</i> (per year)	1700 tons.	785tons			(optional)
<i>Measurement Units</i>	tons				
<i>Normalizing Factor*</i>	1.0	1.6			(optional)
<i>Basis for your Normalizing Factor*</i>	Production				
<i>Normalized Quantity*</i> (per year)	1700	491			500
*See pages 17-19 of the instructions for more information					

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

We implemented a full recycling program and are recovering more than 70% of recyclable material. We are recycling Corrugated carton , paper, glass and some metals.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

Section C

(continued)

C.3

Performance Commitment 3

a. Use this table to report data related to your third performance commitment.

Category (see page 16 of the instructions): Discharges in Water					
Aspect (see page 16 of the instructions): BOD5 Discharge in waste water					
	<i>Baseline</i> (as stated in your application)	<i>Year 1</i>	<i>Year 2</i>	<i>Year 3</i>	<i>Performance Commitment</i> (the goal stated in your application)
<i>Calendar Year</i>	1999	2001			2003
<i>Actual Quantity</i> (per year)	243440	20700			lb (optional)
<i>Measurement Units</i>	lbs				
<i>Normalizing Factor*</i>	1.0	1.6			(optional)
<i>Basis for your Normalizing Factor*</i>	Production				
<i>Normalized Quantity*</i> (per year)	243440	12938			10650
*See pages 17-19 of the instructions for more information					

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

We are in the process of installing a membrane bioreactor which have shown in our pilot runs to lower BOD5 significantly also we have improved our steam stripper operations to the level we observed in 2001.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

Section C

(continued)

C.4 Performance Commitment 4

a. Use this table to report data related to your fourth performance commitment.

Category (see page 16 of the instructions): Energy					
Aspect (see page 16 of the instructions): Energy Usage					
	<i>Baseline (as stated in your application)</i>	<i>Year 1</i>	<i>Year 2</i>	<i>Year 3</i>	<i>Performance Commitment (the goal stated in your application)</i>
<i>Calendar Year</i>	1999	2001			2003
<i>Actual Quantity (per year)</i>	196765mmbt u	276504mmbt u			0lbs (optional)
<i>Measurement Units</i>	BTU				
<i>Normalizing Factor*</i>	1.0	1.6			(optional)
<i>Basis for your Normalizing Factor*</i>	Production				
<i>Normalized Quantity* (per year)</i>	196765mmbt u	172815mmbt u			188894mmbt us
*See pages 15-17 of the instructions for more information					

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

We are optimizing the use of HVACs and lightning systems.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

Section D

Public Outreach and Performance Reporting

D.1 Please briefly summarize the public outreach and reporting activities that your facility has conducted during the year. Feel free, but not obligated, to attach supporting materials (e.g., meeting agendas, public announcements). We reported to our local news papers our selection to NEPT and our Environmental actions that leaded to this achievement also we performed an Environmental Fair with the presence of EPA ,PRASA and PREQB and members of our community and neighbors.

D.2 Please indicate which of the following methods your facility plans to use to make its Performance Track Annual Performance Report available to the public. Please check as many as are appropriate.

☒ Website (URL www.baxter.com)

☐ Open House

☐ Meetings

☒ Press Releases

☒ Community Advisory Panel

☐ Other

Section E

Self-Certification of Continued Program Participation

On behalf of Baxter Healthcare Inc.,
(name of my facility)

I certify that

- ◆ I have read and agree to the terms and conditions specified in *the National Environmental Performance Track Program Guide*. This facility, to the best of my knowledge, continues to meet all program criteria;
- ◆ I have personally examined and am familiar with the information contained in this Annual Performance Report. The information contained in this report is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete;
- ◆ My facility has an environmental management system (EMS), as defined in the Performance Track EMS criteria, including systems to maintain compliance with all applicable federal, state, tribal, and local environmental requirements in place at the facility, and the EMS will be maintained for the duration of the facility's participation in the program;
- ◆ My facility has conducted an objective assessment of its compliance with all applicable federal, state, tribal, and local environmental requirements; and the facility has corrected all identified instances of potential or actual noncompliance; and
- ◆ Based on the foregoing compliance assessments and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable federal, state, tribal, and local environmental requirements.

I agree that EPA's decision whether to accept participants into or remove them from the National Environmental Performance Track is wholly discretionary, and I waive any right that may exist under any law to challenge EPA's acceptance or removal decision.

I am the senior manager with responsibility for the facility and am fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is part of the National Environmental Performance Track program.

Signature/Date July 16th 2002

Printed Name Mr./Mrs./Ms./Dr.Eidiol Ghigliotty

Title General Manager

Phone Number/E-mail Address 787-864-5050 , eidiol_ghigliotty@baxter.com

Facility Name Baxter Healthcare Inc

Facility Street Address Road #3 km 142.5 Guayama P.R. (00784)

Performance Track Identification Number A020032

Paperwork Reduction Act Notice

The public reporting and recordkeeping burden for this collection of information is estimated to average 188 hours per respondent annually. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.